

require the attention of a physician, and the nurse can learn from his diagnosis and her own observations the symptoms which indicate their use. This same is also true of high irrigation of the bowel and lumbar puncture.

NURSING IN SOUTH AFRICA DURING THE BOER WAR, 1899-1900 *

BY GEORGINA FANE POPE, C. N. R.

READING as a young girl a most interesting account of Miss Florence Nightingale's noble work during the Crimean War, I became filled with the desire to become an "army nursing sister" and go to the front. England being happily at peace, and I much under age, I was obliged to moderate my ardor; but with the main hope still uppermost, a few years afterwards I entered the training-school for nurses attached to Bellevue Hospital, New York. Fourteen years later—viz.: October, 1899—I received my appointment, with three other nurses, to go out with the Canadian Contingent then called to active service in South Africa—thus realizing my early aspirations.

Upon our arrival at Cape Town we found our troops had orders to proceed up country immediately. We reported to the principal medical officer, making every effort to be allowed to accompany them to the front, but this we were told was impossible, as no nursing sisters could be accommodated in the field hospitals. So with very disconsolate feelings we saw our countrymen entrain without us, and came to realize at that early date what served us in good stead later, viz.: that we too were soldiers, to do as we were told and go where we were sent. Later in the day we received orders to proceed to Wynberg for duty in the large base hospital there, called No. 1 General. These general hospitals, of which there were thirteen or more, were most complete. They were, as a rule, under canvas, and contained from six hundred to one thousand beds. They left England with a staff of surgeons, sisters, trained orderlies, etc., and a full equipment of everything needful, including the comfortable blue flannel hospital kit that "Tommy Atkins" wears during convalescence.

No. 1 General was placed at Wynberg Barracks and numbered about one thousand beds. No. 2 was pitched under canvas, also at Wynberg, and No. 3 at Rondebosch, about six miles away, close to Mr. Cecil Rhodes's

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beautiful place, "Groot Schuer." Pitched beside No. 3 was the private hospital sent out by the Duke of Portland, and the two numbered over seven hundred beds. The private hospitals were almost ideal in their equipment, having every comfort for the patients, beautifully appointed operating-tents, X-ray apparatus, etc. There were four large general hospitals at the Cape, besides the Portland, a convalescent hospital for officers at Claremont, two large rest camps, and two hospitals for the Boer prisoners at Greenpoint and Simon's Town, for many months all these places being full. At Wynberg we found our services greatly needed, the wounded from Graspan and Belmont having recently been brought down in large numbers. A few days after our arrival a large convoy brought in the wounded from Magersfontein and Modder River, when all my empty beds were filled with the men of the Highland Brigade, which suffered so severely in these engagements. The arrival of this convoy was a most pitiful sight, many of the men being stretcher cases, shot through thigh, foot, or spine. What struck one most was the wonderful pluck of these poor fellows, who had jolted over the rough veldt in ambulances and then endured the long train journey, also the utter self-forgetfulness of everyone else, surgeons, sisters, and orderlies, all of whom worked on regardless of time or hunger until everyone was as comfortable as they could be made.

Tommy made the least of all his woes. A drink first, then, after his wounds had been attended to, "a bit of tobacco" for a smoke, and a piece of paper to "send a line so that they won't be scared at home," were invariably the first requirements.

During this early period, with the exception of sunstroke and rheumatism, almost all the cases were surgical, and operations would continue all day long after the arrival of a fresh convoy. The X-rays were, of course, very valuable in locating bullets and saved Tommy many a probe. I have not yet heard the statistics of the wounded, but from my own experience should judge that the percentage of successful surgical results is very high. I have seen ghastly shell- and explosive-bullet-wounds, which one would think must surely end in septicæmia, make perfect recoveries, while head cases, spine cases, etc., sometimes made seemingly miraculous cures. One saw oftentimes such wonderful escapes! I had a patient—a corporal of the West Yorks mentioned for a distinguished service medal—who had been shot through the jaw, the bullet glancing up sideways, passing through the eye without the slightest injury to the sight, and coming out of the rim of his helmet; another, shot, like Achilles, in the heel, the bullet lodging in the heel of the boot, making a delightful souvenir; one which passed through both legs, escaping the bone, and hanging, a prisoner, under the skin of the left leg;

while another passed through a man's arm and found a resting-place in the purse inside his haversack; others flattened against blessed medals worn round the neck and watches in the tunic pocket, by this means escaping the lungs or heart. After a month spent in the huts at Wynberg, we went under canvas at Rondebosch, experiencing the adventures of camp life and the power of an African midsummer sun, together with sand-storms, rain-storms, and sometimes a too intimate acquaintance of scorpions and snakes.

In February enteric fever cases began to come down. The fever was generally of a very malignant type, being often complicated with pneumonia and early severe head symptoms, while I have seen the body so covered with spots one couldn't put the proverbial "pin" between them. The treatment was generally ice-caps, sponge-baths, and cold packs for temperature, poultices for pneumonia, tincture monson. ovat. and ergotine for hemorrhages. The diet was fresh milk, Benger's food, beef-tea—where there was no diarrhoea—and egg switches, while some doctors included rice, biscuits, soft-boiled eggs, etc., from the start with very favorable results. We had many inoculated cases, which generally ran a mild and irregular course of fever. In my service I did not lose any of these cases except in one instance where there had been no reaction from the inoculation.

We were singularly fortunate at Rondebosch in our results. During the six-months' service there, including medical and surgical cases of our own and the Portland hospital, we had but thirty deaths. But here at the base we always had good air, plenty of good water, with an abundance of fresh milk, eggs, and ice. The general hospital fare was excellent, and added to this we received daily quantities of fruit and dainties sent by the Red Cross Committee of the Colony, besides many medical comforts from England.

In May we were ordered up country, and were the first sisters to reach Kroonstadt, O. R. C., stopping en route at Springfontein and Bloemfontein. At the latter place enteric fever and dysentery were raging, the hospitals, of which there were three general and many smaller ones, being all crowded, No. 9 having, we were told, eighteen hundred patients. All persons and supplies were being taxed to the utmost. In Kroonstadt we had our hardest taste of active service. Lord Roberts and Lord Methuen's forces had just passed through, leaving sick and wounded in large numbers.

Owing to the congested state of the lines of communication, our hospital equipment was delayed a few days in reaching Kroonstadt. The Dutch church, hotels, Staat Huis, etc., were quickly converted into hospitals, where we made the patients as comfortable as possible. Fresh

milk was very hard to get, an officer's servant having been shot dead by the Boers in his effort to get some at a farm near by, but of condensed milk, beef-tea, champagne, and jelly we had plenty.

When our hospital arrived it was pitched on the outskirts of the town, and close beside it the Scottish National, a beautifully equipped hospital just sent out. The weather was now very cold at night, the frost being thick both inside and out of our single bell tents—the patients, being in double marquees, did not feel the cold so much. We were scarce of water, and lived on rations which an orderly cooked for us on a fire on the veldt, dinner being a movable and uncertain feast on a rainy day. Around our camp, within fifty yards, were several six-inch guns, while we had prepared in a donga a place of safety for helpless patients and a bomb-proof shelter for all the hospital staff in case of attack, which for some time threatened us daily. Hanging in our mess was a copy of orders to be observed when attacked, etc. Several mornings we wakened to hear the boom of guns, which, however, were never near enough to necessitate our using the shelter.

Here the mortality was much greater than at the Cape. The men, being greatly undermined by the hard campaign, after drinking the waters of the Modder, contaminated with the Boer dead, fell easy victims to disease, and were in a poor state to stand the ravages of South African enteric fever.

Sad indeed was the now familiar sight of fatigue parties bearing aloft the stretcher containing its silent burden covered by the Union Jack, and still more sad the ever-increasing number of little mounds on the veldt. After two months in Kroonstadt we received orders for Pretoria, where we were attached to the staff of the Irish hospital sent out by Lord Iveagh. Here the service became much lighter, enteric fever being greatly on the wane.

After completing a year's service we Canadian sisters received ten-days' leave of absence, which was spent going through Natal, stopping at all places of interest. We met officers, civil surgeons, and sisters who had been through the siege of Ladysmith whose account of their hardships, including diet and danger, made me feel as though we had had little to bear in comparison.

In November we left for the Cape, spending our last month at No. 1 Wynberg pending embarkation for Canada, which we reached on January 8, 1901, after nearly fifteen-months' absence.

I cannot close this paper without speaking of the great kindness with which we were received on all sides. We had with our troops a most enthusiastic reception at the Cape upon our arrival. By the Royal Army Medical Corps from the Surgeon-General down to the humblest

orderly, we were invariably treated with the greatest courtesy and respect, by the "army nursing sisters" with great consideration and kindness. While among the nursing reserve, of whom there were about eight hundred in South Africa, we made many friends, meeting sisters trained at the London, St. Bartholomew's, St. Thomas's, and many other well-known standard hospitals, whose reputations are well maintained by the work of their nurses in South Africa. We had the privilege of meeting many distinguished physicians and surgeons of the old country, under whom it was a pleasure to serve. The work of the Red Cross was excellent, and great was the timely aid so often received from it, while the kindly gift or word sent or given by the private individual often made one think of the "touch of nature that makes the whole world kin." We found Tommy Atkins a very good patient and a fine fellow: always grateful, generally cheerful, bearing loss of limb, loss of health, and many other minor discomforts with a fortitude that realized our best ideal of British pluck, while his consideration for the presence of the sister was at times quite touching. He is very entertaining during convalescence, often writing verses, sometimes in eulogy of the sisters and again in descriptions of battles, etc., and making all kinds of curiosities, those having had service in India doing beautiful work. I am the proud possessor of several specimens both of verse and handicraft which I value greatly. Above all, he loves tobacco and cigarettes, but enjoys any attention. A lady while at Rondebosch gave me one day in the ward a bundle of handkerchiefs and a pint bottle of white-rose scent. A few minutes later I heard, "Sister, I'd thank you for a clean handkerchief, please, and a drop of that scent on it, sister, please," until all with energy to notice anything were supplied, and even after the fancy handkerchiefs had to be replaced by the regulation kit article a liberal dose of the "ripping scent" would be daily called for.

In conclusion, I would say that I ever deemed it a great privilege to aid in caring for the sick and wounded, and while the hardships necessarily endured in such a campaign have faded from my mind, I still often seem to hear the "Thank you, sister," of the grateful soldier; while together with pleasant memories of large convoys of happy convalescents sent home comes the vision of the many sad graves left on the far-off veldt of South Africa. "Requiem æternam dona eis, Domine; et lux perpetua luceat eis." ("Grant to them Thine eternal rest, O God, and in the light everlasting may they dwell.")

